REPORT ON STUDY OF SEVERAL ITEMS IN PROGRAM FOR
THE MENTALLY RETARDED IN TWENTY-ONE STATES

This is really the second half of a report of a study which the Minnesota Association for Retarded Children has made. Because some persons seeing this may not have seen the first report or may not have it available the first two sections of it are copied here as part of the introduction. The basic information in it applies to this second part also.

PROCEDURES USED IN STUDY (from 1st report)

Shortly after the first of the year 1960, the Minnesota Association for Retarded Children undertook a study of some of the laws relating to the mentally retarded in twenty states. This association employs a program analyst whose duties include gathering material on what is being done elsewhere as part of the association's responsibility in helping to see that Minnesota's program for the retarded is constantly improved. She reviewed the statutes of these twenty states in relation to community aspects of a program for the retarded, but is limiting the report largely to state financial participation for the following facilities: Day care for children (not school classes); sheltered workshops or adjustment centers for older persons; recreation programs; diagnostic centers; mental health clinics; boarding homes or other locally organized residential facilities. There were also some other items not directly related to financial aid.

The twenty states studied were those listed by the National Association for Retarded Children in March 1959 as then having or having recently had official commissions studying some phase of problems of the mentally retarded. These are California, Connecticut, Florida, Illinois, Indiana, Kansas, Kentucky, Maine, Massachusetts, Michigan, Missouri, New Jersey, New York, Oregon, South Carolina, South Dakota, Texas, Utah, Virginia, Wisconsin. The Commission reports were reviewed before the statutes were read. In reporting on the status of each state in regard to items listed earlier, Minnesota's status will be added.

About the middle of April forms were prepared for the purpose of indicating which of the above states subsidized listed activities. They were checked by the program analyst and sent to the states for correction. There was no request for any description of administrative procedures and thus it is realized some responses may have been misinterpreted, although representatives from several states wrote quite clear explanations of their programs or sent printed material which was most interesting and helpful.

BASIS FOR STUDY (from 1st report)

The gathering of this information was undertaken by the association because this state now has an interim commission studying the needs of handicapped children, including the retarded. The Minnesota Association for Retarded Children is of the opinion that it is imperative the state be concerned in broadening and stimulating community activities in order that eventually diagnostic and treatment facilities and others which provide care, training and socialization for the retarded shall be available for every retarded person of every age and degree of retardation in every community.
Only thus is there a real basis for a decision concerning the need for institutional care in individual cases and only thus can the need be reduced for this latter state service. This association has asked the cooperation of these twenty states because it believes that achievements in one state can serve as an impetus to another in reaching its goal of an improved program. This summary and interpretation is written in order to evaluate the information received and to consider it in relation to, our own state program.

REPORT OF STUDY OF-SEVERAL ITEMS IN PROGRAMS FOR THE MENTALLY RETARDED IN TWENTY-ONE STATES

Second Report

CONTENT OF SECOND PART OF STUDY

Items in this report are concerned, with one exception, with more general questions relating to a program for the retarded. They are: Research, Census Permanent Study, Advisory or Policy Making Committee, Incentive Program for Professional Staff and Special Classes.

In each state the form was sent to the agency which from the law seemed to have major responsibility for the well being of the retarded. Three states - California, Kentucky and South Dakota - did not return the form.

There were several forms returned with a notation after an item indicating that the agency returning it had no knowledge concerning the item. Efforts were not made to follow up on such statements. Recognizing the fact that laws on the statute book are not always actively administered, there was a column where this could be indicated.

Research

Research information was shown under four headings—(1) Research Agency Established, (2) Specific State Appropriation, (3) Federal Grant, and (4) other—which included such provisions, as general authorization or funds provided in the law regarding payment for institutional care. (It did not include private funds.) Research carried out by use of federal grants was included in the study because legislative authorization for a state agency to receive such funds is necessary although the allotment of the grant would not be shown in a state statute.

The states indicating they have one or more provisions for research in mental retardation are Connecticut, Illinois, Indiana, Kansas, Massachusetts, Michigan, Missouri, New Jersey, New York, South Carolina, Texas, Virginia and Wisconsin.

Minnesota can be added to this group.

The states with an established research agency are Illinois, Indiana, New Jersey, New York and Wisconsin. Three of these—Indiana, New Jersey and New York—indicated a specific state appropriation. Whether this is in addition to funds necessary to support the research agency is not made clear,

Minnesota does not have such an agency.
Only four states—Connecticut, Indiana, Kansas and Massachusetts—indicated the use of Federal funds for research. There is no differentiation made between different types of research—whether it is basic medical research, the project type involving more largely the educational, social or psychological aspects of mental retardation or some other plan related to a specific aspect of some problem in the field.

Minnesota is using federal funds for both medical and project research.

A number of states under the heading General Authorization have indicated research is being done. These are Connecticut, Massachusetts, Michigan, Missouri, South Carolina, Texas and Virginia. It is realized that with the term research undefined this heading especially may not be interpreted in the same way by everyone and perhaps should not be included. Some persons may list as "research" any summary and analysis of work done over a period of time. Another person may consider that an activity of that type is only a part of an administrative job. Research to this second person would consist of a carefully worked out plan for discovering actual facts relative to some particular unknown quality or aspect of a situation. This would be done by procedures carefully controlled and checked for accuracy. Perhaps under the first concept some of the states that did not indicate the existence of research would be listed, while under the second concept it is possible some of the seven listed would be removed.

Minnesota can be listed in this group. In listing Minnesota with this group, small, but controlled studies made by staff members without any special funds are the ones considered.

In most of the states research was carried out under the direction of the department having responsibility for the institutional program though in several instances more than one state department cooperated. In Indiana and Wisconsin the medical school of the State University gave definite cooperation.

In Minnesota medical and educational research is being done with University cooperation.

Indiana, Kansas, New Jersey, New York and Texas indicated their research programs were actively administered. Massachusetts applied this description only to research done with Federal funds. Missouri, South Carolina and Wisconsin indicate their programs are not actively administered at this time. The other states failed to check either yes or no.

Minnesota could probably be classed with Massachusetts since the use of private funds is omitted. Funds supplied by the Association for Retarded Children are used for some projects where the University or University Medical School is cooperating with an institution for the mentally retarded.

New Jersey has a law administered by the State Board of Health requiring doctors to report the mentally retarded under specified circumstances. It was indicated this is actively administered. No similar law was found for other states.
Minnesota has a law, requiring physicians to report certain children to the State Board of Health, but it has not been used for more than 20 years and will probably be repealed at the 1961 session of the legislature.

Indiana and South Dakota both have laws providing for a continuing and total census or central register. The Indiana law was passed in 1959 and includes all handicapped. It does not provide any specific directions, but requires that a current register shall be kept by a newly created Commission for the Handicapped within the Indiana State Board of Health. According to a report by the state the law is actively administered. South Dakota's law pertains only to the mentally retarded and is under the direction of the State Commission for the Mentally Retarded. It requires cooperation of all public institutions and agencies. The law was amended in 1959 though originally passed much earlier.

Minnesota has a total census law for the retarded which dates back to 1935. It has never been used and will probably be repealed by the 1961 legislature.

Some type of school census was found for all but eight of the twenty states, and two of these were South Dakota and Indiana. The six for whom no type of census law has been found are California, Maine, Michigan, Oregon, Texas and Virginia. Of those requiring a census by the schools, only Connecticut and New Jersey specifically provide by law for a listing of the educable and trainable children. The other states and the groups referred to in the law are:

Massachusetts: All children in school

Illinois, New Jersey and New York: All children of school age (New Jersey's law is permissive and the census need be taken only every 5 years)

New Jersey and Wisconsin: The handicapped children in school.

Florida, Kansas, Kentucky, Missouri, South Carolina and Utah, all handicapped children. (In Utah although mandatory by law it is administered as though permissive.)

Missouri and New York were the only two states that indicated that the law is actively administered.

Minnesota has a mandatory yearly school census for all persons under twenty-one years of age. The law is primarily for the purpose of obtaining a basis for determining state financial aid to schools. The census is to be made by the clerk of the local school board or some other person designated by the local school board. A requirement of the State Department of Education is, however, that all children who are physically handicapped or appear to be mentally retarded shall be listed with additional information. It is believed
that because of the need for a careful determination as to who is mentally-
retarded the usual methods of taking the census do not produce results that
can be relied upon as an accurate listing of the mentally retarded children
in a community.

No effort has been made to secure regulations promulgated by other
states or to check with them on the effectiveness of their laws. Many persons
in Minnesota are of the opinion that knowing who are the retarded is necessary
information on which to base a program, but that possible methods for securing
an accurate and therefore usable census will need a great deal of study. This
Association has recommended to a Legislative Interim Commission now functioning
that the 1961 Legislature again provide for a commission but limited to the
mentally retarded and epileptic and that one of its subjects for study should
be that of a census. Is a total census feasible? Is it necessary? Is a
limited census better? If so what limited census is needed and how can it be
secured?

Permanent Study, Advisory or Policy Making Committee

Although on the questionnaire for this study only the work committee is
used in this item it implies a board or any other body which gives consideration
to the mentally retarded, other than an actual administrative agency. Many of
the boards or committees are not limited to the mentally retarded, but include
the mentally ill or the physically handicapped. As far as can be ascertained
a number of these twenty states have no official group to study and
advise administrative agencies or to aid in coordinating the programs of the
agencies. These are California, Florida, Michigan, New Jersey, South Carolina,
South Dakota and Texas.

The other states have from one to three committees or boards. Those with
only one such group are:

Kentucky, a non-legislative advisory board;

Massachusetts, a board containing both legislators and members represent­
ing the interested public whose purpose is more especially for studying
the program;

Missouri, a commission with legislators and others for both study and
advice;

Utah, an advisory board containing both legislators and other interested
persons;

Virginia, an advisory board containing both legislators and other inter­
ested persons.

The above are all groups authorized by the legislature or appointed by the
Governor. Oregon has a Board of Visitors for their institution which was
appointed by the Board of Control and serves as an advisory board. Other
states may have one or more advisory or study groups organized administratively
and so not apparent from the statutes.

Those states with two official groups to aid administrators in develop­
ing better programs are:
Connecticut, one group advisory and the other responsible for over-all policy. Neither have legislative representation.

Illinois, two advisory groups, one without legislators and the other with both legislative and lay members.

Indiana, two groups, one for over-all planning containing legislators and other interested persons; the other for broad policy making and without legislators.

Kansas, two advisory groups, one a committee with broad program interest and without members from the legislature; the other an advisory committee on institutional management and containing legislators as well as other interested persons.

Maine, an advisory board on interdepartmental affairs with broad policy making responsibilities and a committee with members both from the legislature and interested public to serve as an advisory body.

New York, a continuing legislative commission to study the program and another board without members from the legislature with advisory responsibility.

The only one of the twenty states that indicates there are three groups is Wisconsin. Two of these are primarily for the purpose of studying programs and one of the two has some members from the legislature. The third is advisory and has no legislative representation.

Minnesota has an advisory board authorized by the legislature and appointed by the Governor. Its function is to advise the three departments of the state—Health Education and Welfare—which have some responsibility for the retarded or other handicapped or gifted children.

There is also a Medical Board, Policy Directional Committee on Mental Health. It is appointed by the Commissioner of Public Welfare under legislative direction. Its purpose is to advise the commissioner of Public Welfare on all matters concerning the establishment and maintenance of the best possible practices in all mental institutions and also on the use of research funds.

A third committee is an interagency committee administratively set up and composed of some staff members of the three departments—Health, Education and Welfare—and the Executive Director of the Minnesota Association for Retarded Children. The purpose of the agencies in forming such a committee was to better understand each others' programs and responsibilities and thus to better coordinate all efforts for a unified program for the mentally retarded.

Incentive Programs for Professional Staff

Grants or scholarships to make study possible are given by seven states. Maine, Massachusetts, Oregon and Utah indicate this is only for teachers while Kansas provides such a program only for social workers. However, Illinois and New York provide such grants for both teachers and social workers.
Increased salary as an incentive to get and hold workers has been tried in Connecticut, Kansas, Massachusetts, Missouri, and Utah. This has been limited to teachers in Connecticut, Massachusetts, and Utah, to social workers in Kansas, but including both in Missouri. Indiana has used a training program in their institutions as incentive for teachers while New Jersey has given educational leave to social workers.

Minnesota has obtained federal funds to supply grants for training in social work, and the University of Minnesota provides teacher training with tuition made possible by federal funds. Also in Minnesota there is a differential in teachers' salaries in most schools—the teacher for the retarded child being required to take specialized courses in order to receive this however. Teachers and social workers in the state institutions are under civil service and salary levels can only be increased with approval of both civil service and the legislature.

Special Classes for Mentally Retarded Children

Every one of the states reviewed has by law made possible the establishment of classes for the "educable" retarded with state subsidies. This in most instances refers only to classes in the public schools. Twelve of the 20 states have laws making it mandatory to provide special education for this group. These are Colorado, Connecticut, Florida, Kentucky, Massachusetts, Missouri, New Jersey, New York, Oregon, South Dakota, Texas and Utah. In the other states the law is only permissive. These are Illinois, Indiana, Kansas, Maine, Michigan, South Carolina, Virginia and Wisconsin.

The situation is different in relation to the trainable child. Here eight states—Connecticut, Kentucky, Massachusetts, Missouri, New Jersey, New York, Texas, and Utah—provide for mandatory classes. There are four which have no provision for subsidy for such classes—Florida, Maine, Oregon and South Dakota. Eight states provide subsidy, but on a permissive basis. These are California, Illinois, Indiana, Kansas, Michigan, South Carolina, Virginia and Wisconsin.

Utah is listed as having mandatory classes, but on the form returned there was a statement that they actually function on a permissive basis. Kentucky is listed with mandatory classes for the trainable child as the law which provides for mandatory classes defines "educable mentally handicapped children" as children who are "educable or trainable."

The 1960 session of the Kentucky legislature also tried to meet the needs of exceptional" children for whom the public schools failed to provide classes by providing that until these needs are met, private schools already established if they meet required, standards might qualify as "State schools for exceptional children. Before being put into operation, however, the constitutionality of this provision is to be tested in the court.

Maine is listed as a state which does not give a subsidy for trainable classes. The definition of a "handicapped or exceptional child" is such that the trainable might be included, but the regulations of the Department of Education are such as to exclude them.
whether

On the form there was a piece for indicating whether the law is actively administered. Only six states checked this for either "yes" or "no". These states—Indiana, Kansas, New Jersey, Texas, Massachusetts and Oregon—indicated active administration of the law for the educable and the first four in the list also indicated active administration for the trainable. However, this was questionable in Massachusetts, and Oregon has no trainable classes.

Minnesota has mandatory classes for the educable. State aid is the same for the trainable although classes for the latter are not mandatory. There is also legislation where public school districts may cooperate with each other in setting up classes. Many other states may also have this latter provision. The question was not asked and therefore the information was not given.

**Conclusion.**

In the above statements of status in regard to the items listed it is realized that perhaps interpretation of the meaning of the items may have been different by different persons reading them.

For topics such as most of those included on this form more detailed information would be not only of interest, but of real value in making comparisons as a basis for the improvement of programs. For instance, in order to evaluate research one should know much more about what is actually being done in other states. Of what does it consist? What is the purpose of it? How is it financed?

When it comes to the census laws, the purpose of taking a census is important. Who is included? How was the information obtained? Is it accurate? Does it really serve the purpose for which it was taken?

At this point it does not seem feasible for this agency to ask for such information. The forms sent out required a minimum of checking and it seemed this agency was justified in requesting cooperation if it shared results. The tabulation does show some general trends although extensive study of the questions involved was not made. It is therefore possible some state may have accomplished more than the listing indicates since only occasionally was there information on regulations and procedures. Questions arising as to the interim interpretation of laws in some states have brought most interesting and helpful letters and reports in response to questions. This personal response in addition to the checking of the form has been greatly appreciated as was the original cooperation. The information secured is helpful to us and it is hoped this report maybe helpful to others.